LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

(Type or print clearly in black ink)

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page___ of ___Page(s) THIS SPACE FOR OFFICE USE ONLY

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SECRETARY OF STATE STATE OF IDAHO

See instructions at bottom of page																
Lobbyist's name and permanent business address								Date prepared				Period covered				
Aaron Long													month ending			
PO Box 140117							-	March 7, 2006								
Boise, Idaho 83714-0117									,			(Mo.)			(Yr.)	
								2							06	
Item 1	Total:	s of all reportab	le expend	itures made or	incur	red by Lobi	yist c	r by	Lobbyist's Emplo	oyer on	behalf o	of Lobb	yist's Em	ploye	r.	
Reimbursed Personal Living and Travel * Total Amount for Item 3, at							ate amounts contributed by each employer (Identify employers, under bottom of page.)									
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers		Employer No. 1		. 1	Employer No. 2		Employer No.		io. 3	D. 3 Employer No. 4			
Entertainment Food and Refreshment			s	0.00	\$_	0	00	\$ _		\$			\$			
Living	Accommod	ations			_			_					l			
Advertising					_			_					<u> </u>			
Travel					_			_								
Telephone				0.00	_	0	00	_								
Other Expenses or Services				0.00	_	0	.00	_								
		Total	\$	0.00	\$_	0	.00	\$_	0.00	\$	(0.00	s		0.00	
*1	When the nun	nber of employers	s you are re	porting for requ	l ires mu	altiple L-3 for	ms to	l be fil	ed a total amount fo	i rallemp	loyers sl	rould be	entered or	n Page	1.	
Item								egislator or other holder of public office.								
2 Date			Place			A	Amount		Names o	of Legisla	tors & F	ublic Of	ficials in (Group		
	Continued on	attached page(s)			_		·									
INSTRUCTIONS								3	Employer(s) Name(s) and Address(es)							
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.							No.1 Idaho State Pharmacy Association PO Box 140117, Boise, Idaho 83714-0117									
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.								No.2								
TO BE FILED WITH: Ben Ysursa								3								
Secretary of State							<u> </u>									
PO Box 83720 Boise, ID 83720-0080							No.4	ı								
Phone: (208) 334-2852 Fax: (208) 334-2282																

Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible ltem personal property to any Legislator, or for or on behalf of any legislator. Amount Name of Legislator Receiving or Benefited Date Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which LEGISLATIVE SUBJECT IDENTIFICATION ltem the Lobbyist was supporting or opposing. Code Subject Code Subject Agriculture, horticulture, 17 Health service, medicine, drugs 10 Subject Code | Bill, Resolution or Other | Appropriation Bill Number and controlled substances, health farming, and livestock (from table) Legislative Ident. Number and Section Number Amusements, games, athletics insurance, hospitals Higher education Medicaid Rules 17 Banking, finance, credit and Housing, construction, codes 17 Board of investments Insurance (excluding health 20 Pharmacy Rules 04 Children, minors, youth, insurance) 17 HO 530 senior citizens 21 Labor, salaries and wages, 05 Church and religion collective bargaining 17 HO 519 Consumer affairs 06 22 Law enforcement, courts, 07 Ecology, environment, pollution, judges, crimes, prisons conservation, zoning, land and License, permits water use Liquor Education 25 Manufacturing, distribution and 09 Elections, campaigns, voting, services 26 political parties Natural resources, forest and Equal rights, civil rights, forest products, fisheries, mining and mining products minority affairs 11 Government, financing, Public lands, parks, recreation Social insurance, unemployment taxation, revenue, budget, appropriations, bids, fees, funds insurance, public assistance, Government, county workmen's compensation Government, federal 29 Transportation, highways, 14 Government, municipal streets and roads Utilities, communications, 15 Government, special districts 30 televisions, radio, newspaper, 16 Government, state power, CATV, gas Other (please specify)_

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaha Code.

able ret signature

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